

**UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF RHODE ISLAND**

_____, :
Plaintiff(s) :
v. : Case No. _____
_____, :
Defendant(s) :
:

NOTICE OF ACCEPTANCE OF SERVICE

I, _____

(defendant(s))

hereby acknowledge receipt of the complaint filed in the above referenced action and accept service in accordance with the Agreement on Acceptance of Service between the U.S. District Court for the District of Rhode Island and the Rhode Island Attorney General.

I agree to answer or otherwise plead within the time prescribed in Fed. R. Civ. P. 12(a)(1)(A)(ii), and understand that if I fail to file an answer or otherwise defend within the prescribed time, I will be subject to default pursuant to Fed. R. Civ. P. 55.

Name

Signature

Bar Number

Date

Firm/Agency

Telephone Number

Address

Fax Number

City, State, Zip Code

E-mail Address